

ELIGIBILITY AND BENEFITS

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FOODSHARE WISCONSIN

Welcome to FoodShare Wisconsin. This program helps people who have limited money buy the food they need for good health.

The Wisconsin Department of Health and Family Services administers the State's FoodShare Wisconsin program. Eligibility for the program is determined and benefits issued by county/tribal human or social service agencies (local agency). The US Department of Agriculture is responsible for setting the basic program rules so they are the same everywhere in the country.

FoodShare Benefits

FoodShare benefits are used to purchase food at grocery stores that participate in FoodShare Wisconsin.

FoodShare benefits are deposited in the participants' accounts using an Electronic Benefits Transfer (EBT) system, and are spent using a debit card called the Wisconsin QUEST Card. The Wisconsin QUEST card allows access to FoodShare benefits through point-of-sale or swipe card terminals at food stores. These transactions look like any other debit card transaction and are free to the cardholder.

FoodShare benefits **can** be used to buy foods such as:

- breads and cereals;
- fruits and vegetables;
- meats, fish and poultry;
- dairy products; and.
- seeds and plants which produce food for the household to eat.



FoodShare benefits **cannot** be used to buy items such as:

- nonfood items, such as pet foods, soaps, paper products, and household supplies, grooming items, toothpaste, and cosmetics;
- beer, wine, liquor, cigarettes or tobacco;
- food that will be eaten in the store; or
- · hot foods.

If you eat at a group meal site for the elderly or have meals delivered to your home, you can use FoodShare benefits to pay for these meals if the facility or meal provider is authorized to accept the QUEST card.

FoodSharebenefits can be used for group meals if you are staying in a drug and alcohol treatment center, a shelter for battered women, a shelter for the homeless or a group home for the disabled and the facility is authorized to accept the QUEST card.

Who is Eligible

Individuals or families who use the FoodShare Wisconsin include people of all ages who are employed but have low incomes, are living on small or fixed incomes, have lost their jobs, retired or have disabilities and cannot work.

You do not need to be eligible for, or apply for, W-2 to qualify for FoodShare benefits.

U.S. citizens and certain citizens of other countries who live in the United States legally and permanently may qualify for FoodShare benefits.

People affected by natural disasters may be eligible for FoodShare Wisconsin. If a natural disaster (flood, tornado, etc.) occurs, special procedures and a simplified application process are used to issue FoodShare benefits quickly to victims of the disaster.

FoodShare Wisconsin can replace food purchased with FoodShare benefits that were destroyed in a household misfortune or disaster. The amount of benefits that can be replaced is the actual amount of food that was destroyed up to the household's monthly FoodShare allotment. Replacement benefits will be provided only if the household reports the loss to the agency within 10 days of the date the loss occurred.

Benefit Amounts

FoodShare benefit amounts are based on household size and monthly net income after deductions. The lower the net income, the more FoodShare benefits a household may receive. Only families with very little or no monthly net income will get the maximum amount of FoodShare benefits.

See the Monthly Income/Benefit Amount table in the Income Section.

How to Apply for FoodShare Benefits

To be eligible to receive FoodShare benefits you must:

- File an application with your local county/tribal agency*.
- · Interview with an agency worker.
- · Meet basic eligibility rules.
- Provide proof that you are eligible.
- Register for work (with some exceptions, see the Work Registration section).

*Call Recipient Services at 1-800-362-3002 for the address and telephone number of your local agency.

Note: You can apply for FoodShare benefits at your local Social Security Administration office if:

- You live alone and receive Supplemental Security Income, or
- Everyone in your household receives or is applying for Supplemental Security Income.

When you apply for FoodShare benefits, you are responsible for:

- Answering all questions completely and honestly during your application interview, and
- Providing whatever information or evidence you can to prove that you are eligible.

If you would like to find out if you might be eligible for FoodShare benefits before you apply, go to the State of Wisconsin's web site at <u>access.wisconsin</u>.gov. See page 20 of this publication for more information.

Filing an Application

The local agency will give or mail you an application on the same day you ask to apply. Fill in your name, address, telephone number and signature on the application. Return the signed application to the local agency as soon as possible. The local agency will accept the signed application on the same day you turn it in, even if they cannot interview you on that day.

You will be told what information you must bring with you when you come in for your interview. (See checklist that appears later in this section.)

You can also download the application at http://dhfs.wisconsin.gov/FoodShare/fsforms-pub.htm

If your household has little or no money and needs help right away, let the local agency know that. You may be able to get FoodShare benefits within seven (7) days following the day the local agency receives your signed application.

Important: If you think you may be eligible, it is important to apply as soon as you can since the amount of FoodShare benefits you receive for the first month that you are eligible depends on the date you apply. If you apply early in the month, you will receive more FoodShare benefits for that month. If you apply late in the month, you will receive less.

Interview With An Agency Worker

After you turn in your application, an agency worker will hold an interview with you or another member of your household. Most interviews are held at your local county/tribal social or human services agency. If no one in your household can go to the local agency for an interview, an adult friend or relative who knows your circumstances may go to the interview in your place.

If you cannot go to the local agency and no one can go for you, let the local agency know. An agency worker will arrange to interview you at home or by telephone.

The agency worker will explain the program rules and your rights and responsibilities. Ask the agency worker to explain anything that you do not understand.

Providing Proof that you are Eligible

At the interview, the agency worker will gather information about your household circumstances including persons living with you, income and expenses. You will be asked to provide proof of the information needed to determine your eligibility for FoodShare benefits.

If you have trouble getting the papers or information you need, the agency worker will help you. If written proof is not available, you may give the name of someone (such as your employer) who can confirm your statements.

Checklist of Items Needed to Prove Eligibility for FoodShare Benefits

□ Proof of identity, such as a drivers license, ID card or a birth certificate.	
□Proof of your residence, such as your lease, a driver's license, a rent receipt or a utility bil	l.
□Social Security Number for everyone who is applying for FoodShare benefits.	
□ Proof of immigration status of non-citizens for all household members applying for FoodS benefits.	hare

□ Proof of monthly income of household members, for example:

- Paycheck stubs for the last 30 days.
- Most recent tax return if you or someone in your household is self-employed.
- Benefit letters from the Social Security Administration, Veterans Administration, etc.
- Unemployment Insurance check stubs.
- · Pension information.

□ Proof of monthly out-of-pocket child care expense.

□Proof of monthly shelter costs, such as:

- Lease or mortgage payment book.
- · Homeowner's insurance bills.
- Proof of property taxes.
- Proof of utility costs.

□ Proof of monthly out of pocket medical expenses of those who are:

- Age 60 or over;
- Disabled and receive Social Security disability benefits;
- · Disabled veterans;
- · Disabled surviving spouse or child of a veteran; or
- Railroad or public disability pension retirement recipients.

□In some cases, other types of proof may be needed. Your agency worker will explain any additional information that is required to determine your eligibility for FoodShare benefits.

Eligibility Determination

If you qualify for FoodShare benefits, you will a QUEST card and your benefits will be available no later than 30 days from the date the local agency received your signed application. If you do not qualify for FoodShare benefits, you will get a notice telling you why, within 30 days from the date you applied.

PROGRAM REQUIREMENTS

Use Of Your Social Security Number

You **only** have to give a Social Security Number for each person who is applying for assistance. Social Security Numbers are used to check the identity of household members and to verify income from such sources as employers, banks and other government agencies including:

- Internal Revenue Services (IRS)
- Social Security Administration
- · Veterans Benefits
- Unemployment Insurance

Providing or applying for a Social Security Number is voluntary; however, any person who wants FoodShare benefits but does not provide their Social Security Number or apply for one, will not be eligible for benefits.

Immigration Status

If any members of your household are not U.S. citizens, and you are requesting FoodShare benefits for them, you will have to provide verification of their immigration status from the United States Citizenship and Immigration Services (USCIS).

Income

Under FoodShare Wisconsin rules, most types of income are counted. Here are some examples of counted income:

Earned Income:

Gross wages and salary
Net income from self-employment

Unearned Income:

Social Security benefits
Pensions
W-2 payments
Unemployment Insurance
Strike benefits
Child support and alimony

Gross Income Test

If your gross monthly income (income before any payroll deductions) is greater than the amount shown for your household size in the "Gross Income Test" column in the Monthly Income Amount table shown at the end of this section, your household may not be eligible.

If you are self-employed, total your yearly self-employed income minus the cost of producing the income (do not exclude depreciation). Divide this amount by 12 to calculate your monthly income amount.

The "Gross Income Test" limit does not apply if your household has at least one person who:

- Is disabled or 60 years of age or older; or
- Receives W-2, Child Care, Kinship Care or certain other public assistance programs.

Note: You must provide proof of income for all household members.

Net Income Test

After adding together all of your household's countable income, certain reported deductions such as shelter costs, child care costs and child support paid are subtracted from that amount to calculate your net monthly income.

If your household meets all eligibility rules, the agency worker will determine your FoodShare benefit amount. The amount will be based on the size of your household and your monthly net income after deductions. The lower the net income, the more FoodShare benefits you will receive.

Monthly Benefit Amount

	Monthly Amounts		
Number in	Gross	Maximum	Maximum
Household	Income Test*	Net Income*	Allotment*
1	\$1,596	\$ 798	\$ 152
2	2,140	1,070	278
3	2,698	1,341	399
4	3,226	1,613	506
5	3,770	1,885	601
6	4,312	2,156	722
7	4,856	2,428	798
8**	5,400	2,700	912

^{*} Effective October 1, 2005. These income amounts are based on the 2005 federal poverty level guidelines, which increase by a small percent each October. **For more than eight household members, add \$544 to the gross income test for each additional person and \$272 to the net income limit for each additional person.

Reporting Changes

If all members of your household are elderly, blind or disabled and no one has any earned income, you must report to the agency within 10 days:

- Any new employment
- An increase in total child support income of more than \$100 per month.
- An increase in total other unearned income of more than \$50 per month.
- If a person moves in or out of the household.
- Any change in address and resulting shelter cost.
- Any change in the legal obligation to pay child support.

If you fail to report a change, you may be prosecuted for fraud. To report any of these changes use a FoodShare Wisconsin Change Report form (HCF 16006) or contact your worker by phone, in person, or in writing.*

All other FoodShare recipients must report to the agency by the 10th of the month:

• Total gross monthly income that exceeds 130% of the federal poverty level (see table below) for the reported household size.

If you fail to report a change, you may be prosecuted for fraud. To report a change in income, use a FoodShare Wisconsin Income Change Report form (HCF 16066) or contact your worker by phone, in person or in writing.*

Household	130% FPL	Household	130% FPL
Size		Size	
1	\$1,037	6	2,803
2	1,390	7	3,156
3	1,744	8	3,509
4	2,097	9	3,863
5	2,450	10	4,217

^{*}Some agencies may have you report changes to a change center, if they have one, rather than to your worker.

Six-Month Reporting

Your household may be required to complete a mail-in Six-Month Report form. Households required to complete a Six-Month Report will get an early reminder notice that the form is coming. The reminder will also ask you to save check stubs for all employed household members.

The Six-Month Report form and instructions will be mailed to you the month before the form is due. You must complete the form and return it to your county/tribal or human service agency in order to continue receiving FoodShare benefits. You will receive instructions with the form that will explain how to fill it out and where to mail it.

You will be asked to provide the following information:

EARNED INCOME - current paystubs for everyone in your household who works.

OTHER INCOME - other income of all people in your household. Examples include unemployment insurance, social security, or child support payments you receive.

HOUSEHOLD MEMBERS - information about any people who have moved into or out of your household.

ADDRESS/SHELTER COSTS - current address and shelter costs if you have moved. **CHILD SUPPORT PAYMENTS** – if someone in your household has started to pay child support or there is a change in your legal obligation to pay child support.

You will need to give proof or verify most information when you return the form. You must complete and return the form with the required proof by the date indicated on the form. Your local agency will use the information on your completed form, and the verification you provide to decide if you still qualify for FoodShare benefits.

Child Support Cooperation

While you are receiving FoodShare benefits, you must cooperate with the child support agency to establish paternity or to secure and enforce a child support order for your minor child(ren). If you do not cooperate with the child support agency, your benefits may end or be reduced. If you have good cause to not cooperate, you can file a Good Cause Claim. Good cause for not cooperating may be granted if:

- There is significant risk of physical or emotional harm to yourself or the child if you give information to the child support agency; **or**
- Your child was born as a result of incest or sexual assault; or
- A petition for the adoption of your child has been filed with a court; or
- You are working with an agency to decide if you will place your child for adoption.

You may be asked to provide evidence to prove your good cause claim. Examples of evidence include:

- · Medical, court or law enforcement records.
- Written statements from individuals, such as friends, neighbors, clergy, social workers and medical professionals.

Ask the agency worker for more information about filing a Good Cause Claim.

If you are under a court order to provide child support payments for a child who is not living with you, you must be up-to-date in making those support payments or you may not be eligible to receive FoodShare benefits for yourself.

Work Registration

Persons eligible for FoodShare benefits, who are at least 16 years of age but less than 60 years of age must register for work and accept an offer of a suitable job. Those who do not have to register for employment to receive FoodShare benefits include:

- A parent or other household member who is responsible for the care of a dependent child who is less than 6 years old or for an incapacitated person of any age;
- · Participants in drug addiction or alcohol treatment programs;
- Persons who are already working at least 30 hours per week (or who are receiving weekly earnings which equal 30 times the federal minimum hourly wage);
- · Persons who are receiving, or have applied for, Unemployment Insurance; or
- Students enrolled in a recognized school, training program or institution of higher learning.

Overpayments

Overpayments are benefits issued to you that you are not eligible to receive. You may have to repay payments you receive in error regardless of whether it is your fault or the agency's fault. If federal and state laws require you to repay benefits, your failure to do so could result in collection actions such as:

- · Federal or state tax refund interceptions,
- · Credits or lien and levy against any real property,
- Wage assignment.

Quality Control Review of Your FoodShare Case

Your case may be randomly selected by the State of Wisconsin, Department of Health and Family Services for a quality assurance review. These reviews are to ensure that customers are receiving correct benefits. If you fail to meet with the reviewer your benefits may end.

WISCONSIN QUEST CARD

QUEST Customer Service Help Line: 1-877-415-5164 (voice) 1-800-947-3529 (TTY)

This toll-free help line number is available 7 days a week – 24 hours a day.

What to Know About Your QUEST Card

You must have your QUEST card with you at the store to purchase food using your FoodShare account. The types of food items you can buy with your QUEST Card are listed in the FoodShare Benefits section of this handbook.

Take care of the card as you would a credit or debit card. See the Wisconsin QUEST wallet card at the back of this handbook for additional information.

Spending Benefits

Each month, you may use your QUEST card as often as you want and spend as much of your benefits as you want. At the end of each month, you can leave as many benefits in your account as you want. However, if you do not use your QUEST card for 365 days, all your benefits will be removed from your account.

When Benefits Are Deposited

Each month you are eligible for FoodShare benefits, your benefits will be added to your QUEST card account automatically. The exact date you will receive your benefits is based on the eighth digit of your Social Security Number.

If the eighth digit of your Social Security Number is:	Your FoodShare benefits will be added to your account on:
0	2nd of each month
1	3rd of each month
2	5th of each month
3	6th of each month
4	8th of each month
5	9th of each month
6	11th of each month
7	12th of each month
8	14th of each month
9	15th of each month

As your monthly benefit amounts are added to your QUEST card, the balance on your card will go up. As you use your benefits, the balance goes down.

Account Balance

You should always know the balance in your account before you shop. If you do not know your balance, you can call the QUEST Customer Service Help Line. If you buy groceries that are more than the amount in your account, tell the clerk what amount you want subtracted from your QUEST card account.

You should get a printed receipt at the time you make a food purchase with your QUEST card. The receipt will show the balance in your account. If you do not get a printed receipt, ask for one. Keep all of your receipts after you shop with your QUEST card.

You can also find out what your last 10 purchases or deposits were by calling the QUEST Customer Service Help Line at 1-877-415-5164. You may request a written history of purchases and deposits to your account for the past three calendar months at any time.

If you notice a mistake in your account balance, immediately call the QUEST Customer Service Help Line. When you speak to a customer service representative, make sure you ask for the name of the person to whom you speak and also ask for a "ticket number." The ticket number is a code that will help you prove that you reported the mistake and made the call.

If a computer system problem occurs that adds or subtracts an amount from your account in error, a correction may be made to your balance. The correction could impact your current or future month's balance. You will receive a notice of correction in the mail if it will reduce your balance. If you do not agree that the correction is accurate, you may request a fair hearing. See the "Fair Hearing" section for more details.

Authorized Buyer and Alternate Payee

You can choose an *authorized buyer* to help you use your FoodShare benefits. In addition to you receiving a card, the authorized buyer will receive a QUEST card with his/her name on it, and will have access to your FoodShare benefits to purchase food for your household.

You may choose an *alternate payee* to use FoodShare benefits on your behalf. The alternate payee will receive a QUEST card with his/her name on it. You will not receive a QUEST card.

You can cancel access to your QUEST card account that you have granted to others at any time. To cancel access to your account, call the Customer Service Help Line number at 1-877-415-5164.

Choosing a Personal Identification Number (PIN)

You will be asked to select a personal identification number (PIN), that must be used to access your benefits when using your QUEST card. You will choose four numbers that are easy for you to remember but hard for someone else to figure out.

Keep Your PIN Safe

Never share your PIN with anyone, including the grocery clerk, store manager or other store personnel.

Do not write your PIN on your card or card carrier. Do not keep your PIN in your wallet or purse.

If your QUEST card account is used by you, an authorized buyer/authorized representative, or any other person to whom you voluntarily gave your Wisconsin QUEST card and PIN, the transaction is considered authorized and the benefits **will not** be replaced.

If You Forget Your PIN

If you are in the grocery store and enter the wrong PIN, you have two more chances that day to enter the correct PIN. If you do not enter the correct PIN on the third try, a "lock" is put on your card and you will not be able to use your card until the next day. If you do not remember your PIN call the QUEST Customer Service Help Line at 1-877-415-5164, and chose a new PIN. You should also select a new PIN if you think someone else knows your PIN.

Problems With Your QUEST Card

If your QUEST card does not work, call the Customer Service Help Line at 1-877-415-5164. If you still need assistance, contact your agency worker. You should also call the QUEST Customer Service Help Line if you get an error message that you do not understand.

Error Messages

Examples of error messages you could get are:

- "Card not on file". If you get this message contact the QUEST Customer Service Help Line.
- "Invalid PIN". If you get this message, you have entered your PIN incorrectly. If you do not enter the correct PIN on the third try, a "lock" is put on your card until the next day. If you cannot remember your PIN, call the QUEST Customer Service Help Line and choose a new PIN.
- "Insufficient balance". If you get this message, you have tried to spend more than your balance.
 You can put back some of your groceries or pay for the rest in cash. Before you shop, check your balance.
- "Inactive card". If this is your first card, you must select a PIN before it can be used. Call the QUEST Customer Service Help Line at 1-877-415-5164 to request a PIN.

If Your Card is Lost or Stolen

You must immediately report a lost or stolen QUEST card to the Customer Service Help Line. Your card will be cancelled when you call. If someone uses your card before you call to cancel your card, your benefits **will not** be replaced. It is important to call immediately. Once your card is reported lost or stolen a new card will be mailed to you on the next business day. See wallet card at the back of this handbook for more details.

If Your Card is Damaged

If your card is damaged or the store must manually key your card number each time you use your card, call the Customer Service Help Line at 1-877-415-4165 and request a replacement card.

Taking Care Of Your QUEST Card

- Keep your card safe.
- · Keep your card clean.
- Take care of your card like you would a credit card.
- Do not bend or twist your card.
- Do not use your card to scrape windshields, open door locks, etc.
- Keep the magnetic stripe clean and free from scratches.
- · Store your card in a wallet or purse.
- Keep your card away from magnets such as handbag clasps, televisions, etc.
- Follow the instructions of the store clerk when using your card.
- Never tell anyone your PIN, including the store clerk.

Using Your QUEST Card

You can use your QUEST card at swipe card terminals to buy eligible groceries (see list in FoodShare Benefits Section of this handbook) at stores taking part in FoodShare Wisconsin. Most stores that participate in the FoodShare Wisconsin will have a QUEST sign on the door. If your store does not have a swipe card terminal, you may not be able to use your QUEST card there. Ask the store manager or clerk if the store accepts the Wisconsin QUEST card.

Some small stores, farmers markets or route vendors may use a paper form that you will need to sign.

If the swipe card terminal is not working the store may choose to handle the purchase by calling the Customer Service Help Line.

Returning a Purchase

If you need to return an item to the store, take the item, store receipt, and your QUEST card to the store where it was purchased. The store will issue a credit to your QUEST card account, which will be available to you immediately. You will not get cash back.

If You Move

If you plan to move, contact your worker to report your new address.* If a card is mailed to your old address, it will not be forwarded to your new address.

If You Move Out of State

If you move out of state, you should still be able to use any remaining balance on your Wisconsin QUEST card in your new state. If you cannot find a store in your new state that accepts the Wisconsin Quest card, contact the Wisconsin agency that issued the FoodShare benefits. To continue receiving FoodShare benefits in your new state, you must apply there.

*Some agencies may have you report changes to a change center, if they have one.

Keep Your QUEST Card

Never throw away your QUEST card unless you are told to do so or you are sent a new card. You may be expected to use the same card if you receive FoodShare benefits in the future.

COMPLYING WITH FOODSHARE WISCONSIN REQUIREMENTS

If you are receiving FoodShare benefits you must comply with the program's requirements to continue receiving benefits.

Intentional Program Violation

Any member of your household who intentionally breaks any FoodShare Wisconsin rule can be barred from FoodShare Wisconsin for:

- One year after the first violation.
- Two years after the second violation.
- Permanently for the third violation.

Fraud

Anyone who intentionally gives, or helps to give, false or incomplete information to obtain benefits or commits any act which constitutes a violation of a federal regulation or state statute relating to FoodShare Wisconsin can be prosecuted for fraud. Prosecution for fraud may result in fines, imprisonment, disqualification from FoodShare Wisconsin and a requirement to repay any benefits fraudulently received.

Fraudulent activity includes untruthful or incomplete statements about income, assets, the number and/or relationship of people in the household, or anything which causes an ineligible person to receive benefits.

It also includes failure to report a change in circumstances that affects eligibility and/or misuses of the FoodShare benefits, such as trading or selling FoodShare benefits or the QUEST card.

Any individual who is fleeing to avoid prosecution, custody or confinement for a felony crime, will be ineligible to receive FoodShare benefits.

Any individual who is in violation of probation or parole under federal or state law will be ineligible to receive FoodShare benefits.

Any individual who has been found by a federal, state or local court to have used or received benefits in a transaction involving the sale of a controlled substance, firearms, ammunition or explosives is ineligible to receive FoodShare benefits.

If you are convicted in a court of law for misrepresenting identity or residence in order to receive FoodShare benefits, you may be disqualified from the program for ten years. Permanent disqualification may result from a conviction for the trafficking of FoodShare benefits of \$500 or more. It may also include a fine of up to \$250,000, imprisonment of up to 30 years, or both. Courts may also bar a person from FoodShare Wisconsin for an additional 18 months.

RECIPIENT RIGHTS

You have the right to:

- Be treated with respect by agency staff.
- Have your civil rights upheld. (For additional information see Civil Rights Protection section in this handbook.)
- Have your private information treated confidentially.
- Have a home visit or telephone interview if you cannot get to the FoodShare office or find someone to go for you.
- Receive an application or have the application mailed to you on the same day that you ask for it.
- Have your application accepted immediately by the FoodShare office.
- Ask the agency worker for an explanation of anything in this handbook you do not understand.
- Receive a decision about your application within 30 days.
- Get FoodShare benefits within 7 days of applying if you are in immediate need and qualify for faster service.
- Be notified in advance if your benefits are going to be reduced or ended.
- Request a Fair Hearing if you disagree with any action of the agency.
- See agency records and files relating to you, except information obtained from a confidential source.

Where To Call If You Have Questions

Contact your local county/tribal human or social services agency if you have questions about:

- How to apply for benefits.
- Eligibility requirements.
- Why your application was denied or approved.
- Why your eligibility ended.
- Why your benefits were reduced.
- What to do if you do not receive your benefits or QUEST Card.

Contact QUEST Customer Service at 1-877-415-5164 if:

- · Your QUEST card is lost or stolen.
- · Your QUEST card is damaged.
- You need your QUEST card balance.
- You need to select a new PIN, or change your current PIN.
- If you have questions or need help with your QUEST card.

Fair Hearings

If your application for FoodShare benefits was denied, or your FoodSharebenefits were reduced or terminated, and you think the agency made a mistake, contact the agency worker. If the agency worker does not agree, you can ask the agency worker to assist you in arranging for a prehearing conference and a fair hearing.

Prehearing Conference

It is often possible to come to an understanding with the local agency through a prehearing conference without having to wait for a fair hearing to take place.

At a prehearing conference you get to tell your side of the story, and the local agency's representative will explain to you why they feel that their action is correct. If the agency finds that it has made a mistake, it will change its decision and will take corrective action.

If the agency decides that their initial decision is correct, and you feel that the agency is still wrong, you have the right to go through the fair hearing process.

NOTE: The fact that you agreed to have a prehearing conference does not affect your right to have a fair hearing. You can request a fair hearing and if you are satisfied with the action of the prehearing conference you can cancel your fair hearing.

When to Use The Fair Hearing Process

If you believe that your local agency made an incorrect decision on your eligibility for FoodShare benefits, the fair hearing process may be used to have the decision reviewed. Examples include:

- If your application was denied or your benefits were reduced or terminated, and you think the agency made a mistake.
- If you believe that your application was unfairly denied.
- If your application was not acted upon promptly.
- If your benefits were unfairly discontinued, terminated, or suspended or reduced.

Read each decision letter carefully to help you understand the action taken. If the reason for the change in your benefits is a federal or state rule change, the agency need not grant a request for a fair hearing.

How to Ask for a Fair Hearing

Ask the local agency to help you file for a fair hearing, or write directly to the state at:

Wisconsin Department of Administration/Division of Hearings and Appeals P.O. Box 7875 Madison, WI 53707-7875 Or by calling:

Telephone: (608) 266-7709

The Request for a Fair Hearing form can also be downloaded from the internet at http://dha.state.wi.us/ under "How to Request a Fair Hearing.

You, your chosen representative (if any), and the local agency will all receive written notice at least 10 days before the fair hearing with the scheduled time, date and place for the hearing.

Fair Hearing Deadlines

All requests for fair hearings regarding a FoodShare Wisconsin action must be received within 90 days of the effective date of the agency's action.

Preparing for a Fair Hearing

You have the right to bring witnesses, your own lawyer, or some other advisor to the fair hearing. The agency cannot pay for a lawyer to represent your side of the story, but they may be able to help you find free legal assistance for questions or fair hearing representation.

You have the right, both before and during the hearing, to see the agency's written materials about the case, including your case record, upon which the agency based its decision. You or your representative have the right to question anyone who testifies against you at the fair hearing and to present your own arguments and written materials showing why you think you are right. If the fair hearing is about whether you are or are not incapacitated or disabled, you have the right to present medical evidence for proof, paid for by the agency.

If you cannot speak English, you have the right to have an interpreter present at the hearing. The Division of Hearings and Appeals may authorize payment for necessary translation or interpreters if you ask.

Continuation of Benefits

If you ask for a fair hearing before the effective date of the agency's action, your FoodShare benefits will not be reduced or terminated until after the results of the fair hearing are known. Asking for a fair hearing does not cancel out normally scheduled review/recertification determinations. If the agency informs you before the fair hearing has taken place that the FoodShare certification period for your benefits has run out, you must reapply and be recertified for your benefits to be continued. If the re-eligibility determination shows that there have been changes in your circumstances, benefits may be altered or discontinued because of these changes.

Effects of the Fair Hearing

If the fair hearing decision is in your favor:

- No action will be taken against you by the agency.
- If benefits have been terminated, they will be reinstated. (The date of reinstatement will be listed in the copy of the decision you receive, ordering the agency to reinstate your benefits.)

If the Fair Hearing decision goes against you:

- The local agency's action will stand and you will usually have to pay back whatever benefits you received that you should not have received.
- Ask your worker if there are any legal limitations on the recovery of overpayments.
- No other action will be taken against you for filing a fair hearing request.

Rehearings

If the fair hearing goes against you, you have the right to ask for a "Rehearing" if:

- You have important new evidence that was unknown or unavailable to you before the hearing and that could change the decision, or
- You feel that there was a mistake in the facts of the decision, or
- You feel that there was a mistake in the legal basis of the decision.

A written request for a rehearing must be received within 20 days after the date of the written decision about the fair hearing. The Division of Hearings and Appeals will then decide within 30 days of receipt of the written request if a rehearing is justified. If the office does not issue a written response to the request in 30 days, it is assumed the request is denied.

Appealing a Fair Hearing or Rehearing Decision

If you do not agree with the fair hearing or rehearing decision, it is still possible for you to appeal this decision to the Circuit Court in your county. This must be done within 30 days after you have received the written decision about the fair hearing or within 30 days of the denial of the rehearing request. An appeal to the Circuit Court must be done by filing a petition with the Clerk of Courts in your county. It is best to have legal assistance if you decide to appeal a fair hearing decision in Circuit Court.

See Wisconsin Administrative Code HSS 225.01 and HFS 104.01 (4) (c) and (5) for more details regarding fair hearings.

Collection and Use of Information

The collection of information in the application, including the Social Security Number of each household member applying for benefits, is authorized under the Food Stamp Act of 1977, as amended, (7 United States Code 2011-2036). The information will be used to determine whether your household is eligible or continues to be eligible to participate in FoodShare Wisconsin. Information will be verified through computer matching programs. This information will also be used to monitor compliance with program regulations and for program management.

This information may be disclosed to other federal and state agencies for official examination, and to law enforcement officials for the purpose of apprehending persons fleeing to avoid the law. Providing the requested information, including the Social Security Number of each household member, is voluntary. However, failure to provide a Social Security Number will result in a denial of FoodShare benefits to each individual failing to provide a Social Security Number. Any Social Security Numbers provided for ineligible members will be used and disclosed in the same manner as Social Security Numbers of eligible household members.

Civil Rights Protections

All people applying for or receiving benefits are protected against discrimination. Federal and state laws require all FoodShare benefits to be provided on a non-discriminatory basis.

Any of the following actions may be considered discriminatory treatment when based on race, color, national origin, military participation, sex, sexual orientation, religion, age, political beliefs, disability, association with a person with a disability, arrest or conviction record or marital status:

- Denial of aid, care, services, or other benefits.
- Segregation or separate treatment.
- Restriction in any way of any advantage or privilege received by others.
- Treatment which is different from that given to others in the determination of eligibility.

OTHER PROGRAMS

Women, Infant and Children Program

If you are eligible for FoodShare Wisconsin you may also be eligible for WIC (a special supplemental food program for Women, Infants and Children). Pregnant women and young children may get nutritious food and health/nutrition counseling through this program. To find out more about WIC and other programs for which you may be eligible, contact 1-800-722-2295.

Access to Eligibility Support Services for Health and Nutrition (ACCESS)

To find out if you may be eligible for help with buying food, low or no-cost health care for families or help with buying prescription drugs, visit the state of Wisconsin's web site at access.wisconsin.gov.

This screening tool will take you about 15 minutes to use. We'll ask you to tell us about the people in your home, the money you get from a job or other places, your housing costs and a few other bills. What you tell us will stay private and secure.

When you're finished, we'll tell you if you might be able to get help through programs such as, FoodShare Wisconsin, BadgerCare, Medicaid and SeniorCare.

NUTRITION INFORMATION

Choose foods to promote a healthy future at every stage of life.

- FoodShare benefits expand your ability to eat a variety of foods.
- Let the pyramid guide your food choices.



To find the amounts right for you, go to MyPyramid.gov.

Complaints

If you believe you have been discriminated against in any way that relates to applying for FoodShare Wisconsin or receiving FoodShare benefits, contact:

Affirmative Action/Civil Rights Compliance Officer Department of Health and Family Services P.O. Box 7850 Madison, WI 53707-7850 Telephone: (608) 266-9372 (voice) or (888) 701-1251 (TTY)

The Department of Health and Family Services is an equal opportunity employer and service provider. If you have a disability and need to access this information in an alternate format, or need it translated to another language, contact (608) 266-3465 or (888) 701-1251 (TTY). All translation services are free of charge. For civil rights questions call (608) 266-3465 or (888) 701-1251 (TTY).

For civil rights questions call (608) 266-9372 (voice) or (888) 701-1251 (TTY). Or, in accordance with federal law and U.S. Department of Agriculture policy, this institution if prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

State of Wisconsin
Department of Health and Family Services
Division of Health Care Financing

PHC 16012 (Rev. 10/05)

WISCONSIN QUEST CARD



1-877-415-5164

HOW TO FIND OUT YOUR

WISCONSIN QUEST CARD BALANCE

Your current balance is printed on your last receipt. However, if you have lost your last receipt, have your card available and:

STEP 1..... Call the Customer Service Automated Response Unit (ARU) toll-free, 1-877-415-5164. This number is listed on the

back of your card. [TDY (Telecommunications Relay Service for Hearing Impaired): 1-800-947-3529]

STEP 2.....Press 1 for English or 2 for Spanish. If you are having difficulty entering numbers on a touch tone phone or you have a rotary dial phone, wait for the third prompt to speak the number(s).

STEP 3...... Enter your 16-digit card number. If you enter the wrong number you will be asked to try again.

STEP 4..... You will hear your remaining balance.

STEP 5..... You can hang up, or you can choose other service options.

TO REPORT YOUR CARD LOST, STOLEN OR DAMAGED:

Repeat steps 1 through 3 above. If you do not know your card number, wait 20 seconds until you hear the message "to report your card lost, stolen or damaged" and press 1. You will be transferred to a Customer Service Representative.

HOW TO USE YOUR QUEST CARD WHEN YOU BUY FOOD

- STEP 1......Before you shop, check your balance by checking your last receipt or by calling Customer Service at 1-877-415-5164. This balance will be the most you can spend with your QUEST card.
- STEP 2.....Choose your groceries and go to a checkout lane. Some stores will display the QUEST card sign at the checkout lane.
- step 3.....Tell the clerk that you are using your QUEST card. If you buy groceries that are more than the amount in your account, tell the clerk what you want subtracted from your FoodShare account. Once your groceries have been totalled, hand your QUEST card to the clerk, or slide it through the swipe card terminal.
- STEP 4......Enter your four digit Personal Identification Number (PIN) on the keypad. The terminal will show (****); you will not see your PIN on the terminal screen.
- **STEP 5.....** Press the ENTER or YES key. If you are not sure which key to press, ask the clerk.
- **STEP 6.....**The clerk enters the FoodShare total and, if it is right, you press the ENTER or YES key.
- **STEP 7.....**You will get a copy of a printed receipt showing:
 - store name.
 - date and time of purchase,
 - amount of your purchase, and
 - your QUEST card ending balance.
- **STEP 8.....**Keep your receipt so you will know your new balance the next time you shop.

State of Wisconsin Department of Health and Family Services Division of Health Care Financing

This institution is an equal opportunity provider.

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